Parent/carer consent -Routine off-site visits

School/centre: Ysgol Dyffryn Conwy Your child's name:	
Thes	se visits will normally take place at the following, or similar, locations:
	North Wales Area
I un	derstand that:
C	such visits will normally take place within the school/centre normal hours, but that if, occasionally, they are likely to extend beyond this, adequate advance notice will be given so that I may make appropriate arrangements for my child's return home;
C	my specific permission will be sought for any visits beyond those listed above or which could involve commitment to extended journeys or times, expense or adventure activities;
• a	all reasonable care will be taken of my child during the visit;
a	my child will be under an obligation to obey all directions given and to observe all rules and regulations governing the visit and will be subject to all normal school/centre discipline procedures during the visit;
	must inform the school/centre of any medical or psychological condition or physical disabilities that may affect them during the visit;
ii P	all young people are covered by the County Council's third party public liability insurance in respect of any claim arising from an accident caused by a defect in the school premises or equipment or attributable to negligence by the Council or one of its employees. Please note that this insurance policy does not include personal accident or personal belongings cover
Full	name of parent/carer:
Sign	nature of parent/carer:Date:
۸dd	race:

______Tel:_____